waste management method that is available to me and that I can afford.

Printed/Typed Name   ,	Signature / / / / / / / / / / / / / / / / / / /	Month Day Year
JOHN MARASCA	Loty-Oracusc	02/14/9/
17 Transporter 1 Acknowledgement of Receipt of Materials	A a a l	
Printed/Typed Name	Signature / /	Month Day Year
Throng BALSSIE	HAMMER BUSSIE	012/14/91/
18. Transporter 2 Acknowledgement of Receipt of Materials		
Printed/Typed Name	Signature	Month Day Year
19. Discrepancy Indication Space		

20. Facility Owner or Operator	Certification of receipt of hazardous r	materials covered by	this manifest except	as noted in Item 19.
Printed/Typed Name		Signature		

Month		Day		Yea	
		1	-	-	

DO NOT WRITE BELOW THIS LINE.

P.O. Box 400, Sacramento, CA 95812-0400